



BIO-MEDICAL EQUIPMENT MAINTENANCE & MANAGEMENT PROGRAM (BMMP) OF  
PUNJAB HEALTH SYSTEMS CORPORATION



# INCIDENT REPORT

I. R. No. **104**  
Date **12/12/23**  
Region

1 Device Identification	
a. Asset No.	42000 30016
b. Asset description	oxygen Concentrator.
c. Manufacturer Name	Other
d. Model	27-52W
e. Serial No.	2105 26 3221043
f. Any other Details	

2 Date & Location	
a. Hospital Name	CHC MORINDA
b. Department Name	Main OF
c. Date of Occurrence	12/12/23
d. Time of Occurrence	
e. Date of Reported	12/12/23
f. Time Reported	

3 Follow Up Action	
A. BM Work Order No.:	

3 Damage to Equipment	
A Major <input checked="" type="checkbox"/>	B Minor <input type="checkbox"/>

5 Description of the Incident (State exactly what was the sequence of events leading up to the incident and where the incident occurred Please add another paper if space provided is not enough)  
**Machine is submerged in flood & Rain later**

6 Cause of Incident	
a. Physical Damage <input type="checkbox"/>	j. Inadequate Illumination <input type="checkbox"/>
b. Missing Spare/Parts <input type="checkbox"/>	k. Hazardous Method or Procedure <input type="checkbox"/>
c. Operating without Authorization <input type="checkbox"/>	l. Non Use of Personal Protective Equipment <input type="checkbox"/>
d. Wrong Usage / Setting <input type="checkbox"/>	m. Patient Action <input type="checkbox"/>
e. Unsafe Equipment <input type="checkbox"/>	n. Fire, Explosion or Natural Calamities <input checked="" type="checkbox"/>
f. Unsafe Position or Posture <input type="checkbox"/>	o. Hazardous Personnel Attire <input type="checkbox"/>
g. Working on Moving or Dangerous Equipment <input type="checkbox"/>	p. Unsafe Design or Arrangement <input type="checkbox"/>
h. Distraction, Teasing or Willfull Misconduct <input type="checkbox"/>	q. Equipment Malfunction or Device Failure <input type="checkbox"/>
i. Not Guarded or Temporarily Guarded <input type="checkbox"/>	Other Explain <input type="checkbox"/>

7 Action Taken on Equipment Repair	
a) Minor problem and solved without any financial implications.	<input type="checkbox"/>
b) Minor problem and submitted the quote for required parts.	<input type="checkbox"/>
c) Major problem, needs vendor support for further trouble shooting.	<input type="checkbox"/>
d) Major problem. Can not be repaired, Proposed for BER	<input checked="" type="checkbox"/>

E) Replacement required parts details		Part Nos	Qty.	Approx. Cost
a)				
b)				
c)				
d)				
e)				
Total approx. estimate cost of Repair				

8 Remarks (if any)

Engineer Name: **Ranjit Singh**  
Date: \_\_\_\_\_  
NODAL OFFICER: **ਸੀ. ਅੰਚ ਸੀ. ਮੋਰਿੰਡਾ, ਰੂਪਨਗਰ**  
Date: \_\_\_\_\_  
AOV

# AOV INTERNATIONAL LLP

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38425

## SERVICE REPORT

HOSPITAL NAME	CHC MORINDA	COMPLAINT NUMBER	Service Call
HOSPITAL TYPE	CHC	COMPLAINT RECEIVED DATE/ TIME	
DISTRICT	ROPAR	COMPLAINT ATTENDED DATE/ TIME	12/12/23
USER CONTACT DETAILS		COMPLAINT RECTIFIED DATE/ TIME	12/12/23
EQUIPMENT TYPE (TICK THE BOX)	<input checked="" type="checkbox"/> UNDER CONTRACT <input type="checkbox"/> UNDER WARRANTY <input type="checkbox"/> UNDER AMC/CMC <input type="checkbox"/> PHYSICAL DAMAGE <input type="checkbox"/> CONDEMNED		

EQUIPMENT DETAIL	EQUIPMENT NUMBER: 4200030016	MANUFACTURER: others
	EQUIPMENT NAME: OXYGEN CONCENTRATOR	MODEL NO: 24-52W
	DEPARTMENT: Main of	SERIAL NUMBER: 210526322104

**PROBLEM IDENTIFIED:** Machine is Not Working. Due to flood and Rain Water submerged

**ACTION TAKEN:** Checked and found the machine is not getting on. In these m/c the solenoid valve is faulty and compressor is also faulty and display gives the Error (E) and inside there rusting is everywhere. Machine is not repairable because part is not available in market.

PHASE - NEUTRAL (VOLT): 236     
  PHASE - EARTH (VOLT): 234     
  NEUTRAL - EARTH (VOLT): 02

**ENGINEER'S REMARKS:** This M/c is recommended for condemnation.

SPARES CONSUMED	PART NAME	QTY.	SERIAL NO. / LOT NO.
	/	/	/

**CUSTOMER REMARKS IF ANY:**

JOB COMPLETED SATISFACTORY  YES    NO

CUSTOMER SIGNATURE WITH *ਸੀ. ਐਚ. ਸੀ. ਮੋਰਿੰਡਾ, ਰੁਪਨਗਰ*

FOR AOV INTERNATIONAL LLP  
*Ranbir singh*  
*Ravi Bhardwaj*  
 ENGINEER NAME & SIGNATURE

